

## CITY OF HELENA EMPLOYEE INSURANCE RATES

Updated 05/11/2017

PLAN YEAR: JULY 2017 - JUNE 2018

## MEDICAL INSURANCE:

	BRIDGER PLAN				
	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$860.00	\$688.00	\$645.00	\$537.50	\$430.00
Employee	\$40.00	\$212.00	\$255.00	\$362.50	\$470.00
Spouse	\$437.00	\$437.00	\$437.00	\$437.00	\$437.00
Child(ren)	\$178.00	\$178.00	\$178.00	\$178.00	\$178.00
Family	\$614.00	\$614.00	\$614.00	\$614.00	\$614.00

	MADISON PLAN				
	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$860.00	\$688.00	\$645.00	\$537.50	\$430.00
Employee	\$0.00	\$172.00	\$215.00	\$322.50	\$430.00
Spouse	\$417.00	\$417.00	\$417.00	\$417.00	\$417.00
Child(ren)	\$171.00	\$171.00	\$171.00	\$171.00	\$171.00
Family	\$586.00	\$586.00	\$586.00	\$586.00	\$586.00

	MISSION PLAN				
	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$792.00	\$688.00	\$645.00	\$537.50	\$430.00
Excess Funds	\$68.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee	\$0.00	\$104.00	\$147.00	\$254.50	\$362.00
Spouse	\$384.00	\$384.00	\$384.00	\$384.00	\$384.00
Child(ren)	\$157.00	\$157.00	\$157.00	\$157.00	\$157.00
Family	\$540.00	\$540.00	\$540.00	\$540.00	\$540.00

	HDHP PLAN				
	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$579.00	\$579.00	\$579.00	\$537.50	\$430.00
Excess Funds	\$281.00	\$109.00	\$66.00	\$0.00	\$0.00
Employee	\$0.00	\$0.00	\$0.00	\$41.50	\$149.00
Spouse	\$281.00	\$281.00	\$281.00	\$281.00	\$281.00
Child(ren)	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00
Family	\$395.00	\$395.00	\$395.00	\$395.00	\$395.00

## DENTAL &amp; LIFE INSURANCE:

	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$45.28	\$36.22	\$33.96	\$28.30	\$22.64
Employee	\$0.00	\$9.06	\$11.32	\$16.98	\$22.64
Spouse	\$33.72	\$33.72	\$33.72	\$33.72	\$33.72
Child(ren)	\$29.30	\$29.30	\$29.30	\$29.30	\$29.30
Family	\$43.96	\$43.96	\$43.96	\$43.96	\$43.96

## VISION INSURANCE:

	40 HOURS	32 HOURS	30 HOURS	25 HOURS	20 HOURS
City's Contribution	\$6.82	\$5.46	\$5.12	\$4.26	\$3.41
Employee	\$0.00	\$1.36	\$1.71	\$2.56	\$3.41
Spouse	\$6.82	\$6.82	\$6.82	\$6.82	\$6.82
Family	\$14.64	\$14.64	\$14.64	\$14.64	\$14.64